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10/580,776	05/26/2006	Guo Liang Yang	7843P007	7128
Blakely Sokolo	7590 09/16/200 <b>ff</b>	EXAMINER		
Taylor & Zafma		VO, CECILE H		
7th Floor 12400 Wilshire	Boulevard	ART UNIT	PAPER NUMBER	
Los Angeles, C.	A 90025-1026	2169		
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			09/16/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Communication		Application	on No.	Applicant(s)				
		10/580,77	76	YANG ET AL.				
	Office Action Summary	Examiner		Art Unit				
		CECILE V	O .	2169				
Period fo	The MAILING DATE of this communicat or Reply	tion appears on the	e cover sheet with the d	correspondence ad	ddress			
WHIC - Exter after - If NC - Failu Any	ORTENED STATUTORY PERIOD FOR CHEVER IS LONGER, FROM THE MAIL asions of time may be available under the provisions of 3T SIX (6) MONTHS from the mailing date of this communic period for reply is specified above, the maximum statutor to reply within the set or extended period for reply will, reply received by the Office later than three months after the patent term adjustment. See 37 CFR 1.704(b).	LING DATE OF TH 7 CFR 1.136(a). In no everation. The period will apply and we by statute, cause the app	HIS COMMUNICATION ent, however, may a reply be tir Ill expire SIX (6) MONTHS from lication to become ABANDONE	N. mely filed the mailing date of this of the (35 U.S.C. § 133).	·			
Status								
1) 又	Responsive to communication(s) filed o	on 20 June 2008						
•			on-final					
3)	This action is <b>FINAL</b> . 2b) This action is non-final.  Since this application is in condition for allowance except for formal matters, prosecution as to the merits is							
٥,١	closed in accordance with the practice under <i>Ex parte Quayle</i> , 1935 C.D. 11, 453 O.G. 213.							
Dispositi	on of Claims							
4)⊠	4)⊠ Claim(s) <u>1-37</u> is/are pending in the application.							
-	4a) Of the above claim(s) is/are withdrawn from consideration.							
	□ Claim(s) is/are allowed.							
	6)⊠ Claim(s) <u>——</u> is/are rejected.							
· ·	Claim(s) is/are objected to.							
-	8) Claim(s) is/are objected to.							
	on Papers		•					
	The specification is objected to by the E	vaminor						
•			□ objected to by the	Evaminer				
10) The drawing(s) filed on is/are: a) accepted or b) objected to by the Examiner.								
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).								
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).  11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.								
	ınder 35 U.S.C. § 119							
	-	fouciero muionitu	do: 25 11 0 0 0 110/o	) (d) on (f)				
	Acknowledgment is made of a claim for	toreign priority un	der 35 U.S.C. § 119(a	)-(a) or (t).				
a)	All b) Some * c) None of:	aumanta haya ha	n na aaiyaad					
	1. Certified copies of the priority documents have been received.							
	2. Certified copies of the priority documents have been received in Application No							
	3. Copies of the certified copies of the priority documents have been received in this National Stage							
application from the International Bureau (PCT Rule 17.2(a)).								
* See the attached detailed Office action for a list of the certified copies not received.								
Attachmen			_					
	e of References Cited (PTO-892)	0.40)	4) Interview Summary					
2) Notice of Draftsperson's Patent Drawing Review (PTO-948)  3) Information Disclosure Statement(s) (PTO/SB/08)  Paper No(s)/Mail Date  Notice of Informal Patent Application								
Paper No(s)/Mail Date 6)  Other:								

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#### **DETAILED ACTION**

1. This Office Action is in response to the Applicants' amendment received on 06/20/2008.

2. Claims 1-37 are presented for examination, with claims 1, 21 and 37 being independent.

# Response to Remarks

3. Applicant's request for reconsideration of the non-finality of the rejection of the last Office action because the Article 34 PCT claims amendments submitted on May 26, 2006 were not examined in the Office Action dated February 21, 2008; and second Article 34 PCT claim amendment was not received by PTO according to the PAIR system is acknowledged. The examiner respectfully denied.

Examiner received a phone call from the Applicant on June 17, 2008 regarding claims amendments of application 10/580,776 submitted on May 26, 2006 were not examined in the Office Action dated February 21, 2008. On June 18, 2008 after confirmed with supervisor, Examiner, in response to the event, agreed to issue a second Non-Final office action based on claims amendments submitted on May 26, 2006. However, the Applicant asserted that latest claims amendment was not received by PTO. Therefore, Examiner requested the latest claims amendment submitted for examination.

Examiner respectfully submits that the claims amendments received on June 20, 2008 is not in condition to issue a Non-Final office action because the amendment is based on the set of claims was examined in previous Office Action.

Examiner contacted and left a message for the phone interview to the Applicant on August 29, 2008. No reply has been received. Therefore, this action has been made **FINAL** based on reason as indicated above.

## Specification

4. The abstract of the disclosure is objected to because it does not include a brief narrative of the disclosure. Correction is required. See MPEP § 608.01(b).

Applicant is reminded of the proper content of an abstract of the disclosure.

A patent abstract is a concise statement of the technical disclosure of the patent and should include that which is new in the art to which the invention pertains. If the patent is of a basic nature, the entire technical disclosure may be new in the art, and the abstract should be directed to the entire disclosure. If the patent is in the nature of an improvement in an old apparatus, process, product, or composition, the abstract should include the technical disclosure of the improvement. In certain patents, particularly those for compounds and compositions, wherein the process for making and/or the use thereof are not obvious, the abstract should set forth a process for making and/or use

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thereof. If the new technical disclosure involves modifications or alternatives, the abstract should mention by way of example the preferred modification or alternative.

The abstract should not refer to purported merits or speculative applications of the invention and should not compare the invention with the prior art.

Where applicable, the abstract should include the following:

- (1) if a machine or apparatus, its organization and operation;
- (2) if an article, its method of making;
- (3) if a chemical compound, its identity and use;
- (4) if a mixture, its ingredients;
- (5) if a process, the steps.

Extensive mechanical and design details of apparatus should not be given.

## Claim Rejections - 35 USC § 102

5. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless -

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

- 6. Claims 1-37 are rejected under 35 U.S.C. 102(e) as being anticipated by Maier et
- al. US Publication Number 2005/0027570 A1 (hereinafter referred to as Maier).

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Regarding claim 1, Maier discloses a method for retrieving medical images from various sources and in different formats, to enable the creation of teaching files and research datasets, for the building of a personal medical image library (see abstract), the method comprising:

- (a) directly retrieving a plurality of medical images from various sources (e.g. Images and associated data may be requested using any suitable query, §0022, lines 3-
- 4. Wherein, processes involve the collection and management of image data in disparate image data protocols and from different sources, §0005, lines 1-3);
- (b) storing the plurality of medical images in a database (e.g. the system may store image an other data using at least one database, §0022, lines 1-2);
- (c) generating a database record for the teaching files and research datasets (e.g. library component (as *database record*) may comprise one or more server, and a plurality of database. Wherein, database(s) may include a database for native images, which are stored in association with an identifier for the image subject. These identifiers may be used to determine access rights to an image or group of images, §0047, lines 1-5 and lines 9-11);
  - (d) generating the teaching files and research datasets file (e.g. website, §0015);
- (e) saving the teaching files and research datasets into the database (e.g. expedite the addition of a suitable profile to the profile database, §0046, lines 11-12); and

(f) generating at least one index of the teaching files and research datasets (e.g. all of the images are associated with the subject identifiers listed on the web page, §0061, lines 7-8).

(g) automatically anonymizing patient identification data when the at least one medical image is retrieved from the various sources (e.g. access blocking, §0053, lines 8-21).

Regarding claim 2, Maier discloses the method further including a searching mechanism for searching the teaching files and research datasets (§0051, lines 1-4 and 8-15)

Regarding claim 3, Maier further discloses, wherein the medical images are from at least one discipline selected from the group consisting of radiology, nuclear medicine, dermatology, pathology, ophthalmology, cardiology, neurology, endoscopy, angiography, biomedicine, ECG, EEG, and EMG (§0042, lines 9-12).

Regarding claim 4, Maier further discloses, wherein the method is in accordance with MIRC schema (e.g. designated website, §0025, lines 1-7).

Regarding claim 5, Maier discloses the method further including anonymizing patient sensitive information, the patient sensitive information being able to be revealed to a generator of the teaching files and research datasets (e.g. a password distributed

from the library component or other system computer may be used to designate access to all, or to a designated subset, of images in the library that pertain to a designated subject, §0047, lines 11-15).

Regarding claim 6, Maier further discloses, wherein the patient sensitive information is not revealed publicly (§0053, lines 4-21).

Regarding claim 7, Maier further discloses, wherein the anonymization process includes the replacing of each item of the sensitive information with an anonymization code (§0053, lines 4-21).

Regarding claim 8, Maier further discloses, wherein the anonymization code includes a prefix, a randomly generated number and a type (§0054, lines 9-13).

Regarding claim 9, Maier further discloses, wherein the prefix is a short string of characters representing the generator of the sensitive information; and the type represents nature of the sensitive information (§0054, lines 9-13).

Regarding claim 10, Maier further discloses, wherein a check is first performed to determine if the item of sensitive information has previously been anonymized and the anonymization code previously generated; and, if yes, retrieving and using the previously generated anonymization code (§0053, lines 1-Regards,

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Regarding claim 11, Maier further discloses, wherein the sensitive information includes one or more items selected from the group consisting of: patient's name, patient ID, other patient's names, other patient IDs, patient's birth name, patient's address, patient's telephone numbers, patient's mother's birth name, region of residence, country of residence, military rank, branch of service, patient comments, additional patient history, referring physician's name, referring physician's address,

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Regarding claim 12, Maier further discloses, wherein, in step (c), ACR codes are entered as a result of system prompts (e.g. authentication code, §0025, lines 1-7).

referring physician's telephone numbers, and all other person names (§0047, lines 3-8).

Regarding claim 13, Maier further discloses, wherein the ACR codes are used for the at least one index of the teaching files (§0025, lines 1-7).

Regarding claim 14, Maier further discloses, wherein indexing is by at least one selected from the group consisting of: title, abstract, keywords, authors, affiliations, contacts, patient information, radiological codes, image format, image compression status, image modality, anatomic location, and ACR codes (e.g. all of the images are associated with the subject identifiers listed on the web page, §0061, lines 7-8).

Regarding claim 15, Maier further discloses, wherein, for internal searching, patient sensitive information is revealed, and for external searching patient sensitive information is anonymized (§0053, lines 7-21).

Regarding claim 16, Maier further discloses, wherein after each medical image is retrieved in step (a) it can be viewed before being stored (§0053, lines 18-21).

Regarding claim 17, Maier further discloses, wherein all medical images are kept in their original format once retrieved (§0049, lines 3-8).

Regarding claim 18, Maier further discloses the formats include at least one selected from the group consisting of: AVW, HDR/IMG (Analyze format version 8.0 and 7.5), BMP (Windows Bitmap format), DICOM (Digital Imaging and Communications in Medicine), GIF, JPEG, JPEG 2000, PNG, PNM, PPG, RGB, RGBA, SGI, TIFF, AVW, HDR/IMG (Analyze format version 8.0 and 7.5), Animated GIF, MIRA, Muti-sliced TIFF, MOV, AVI, MP3, RM, and Waveform for ECG, EEG, EMG (§0049, lines 13-21).

Regarding claim 19, Maier further discloses, wherein for two-dimensional medical images, two additional JPEG images are generated for ease of browsing using a web browser, and for other image formats, an additional thumbnail image may be generated (e.g. Fig. 4, §0061).

Regarding claim 20, Maier further discloses, wherein the two additional JPEG images are of the same size as thumbnail images (see Fig. 4 -5).

Regarding claim 21, Maier discloses an apparatus for retrieving medical images from various sources and in various formats for creating at least one teaching file and research dataset; the apparatus comprising:

a database for storing the at least one teaching file and research dataset in a generated database record (e.g. databases, 171, 173 and 175 in F. 1),

an image retrieval interface configured to directly retrieve medical images from various sources and in different formats (§0020, lines 15-18),

an MIRC server configured to provide an MIRC file storage service for the database and for a user's machine automatically anonymizing patient identification data based upon the at least one medical image retrieved from the various sources (e.g. database server 161 in Fig. 1),

a graphic user interface for operation on a user's machine to communicate with the MIRC server (§0019, lines 1-6); and

a web server to service requests from the graphic user interface (e.g. web server 141 in Fig. 1).

Regarding claim 22, Maier further discloses, wherein the database is a relational database for storage of all required information, including: database tables; database indexes; database scripts; and pointers to the medical images, teaching files and

research datasets (§0047, lines 3-9).

Regarding claim 23, Maier further discloses, wherein the server serves requests received from a user via the graphic user interface on a user's machine; the graphic user interface being for providing access functions and file editing functions (e.g. terminals 111, 113 and 115 in Fig. 1).

Regarding claim 24, Maier further discloses, wherein the image server includes at least one selected from the group consisting of: a two dimensional image loader, a three dimensional image loader, a multi-media loader and a telemetry loader (§0042, lines 1-8).

Regarding claim 25, Maier further discloses, wherein the two-dimensional image loader is for retrieving two-dimensional still images (§0042, lines 1-8).

Regarding claim 26, Maier further discloses, wherein the three-dimensional image loader is for retrieving three-dimensional still images (§0042, lines 1-8).

Regarding claim 27, Maier further discloses, wherein the multi-media loader is for retrieving multi-media files (§0043, line 1-3).

Regarding claim 28, Maier further discloses, wherein the telemetry loader is for retrieving telemetry data (§0043, lines 1-3).

Regarding claim 29, Maier further discloses, wherein the graphic user interface includes a PMIL client as a user interface able to run in a web browser or as a stand alone application on a user's machine, and provides MRIC editing functions (e.g. Patient browser 111 in Fig. 1).

Regarding claim 30, Maier further discloses, wherein the server includes an MIRC storage for providing an MIRC file storage service for the database and for the user's machine (e.g. web server 141, §0034, lines 7-9).

Regarding claim 31, Maier further discloses, wherein the MIRC server further includes an MIRC query to provide queries as defined by the MIRC scheme (§0011, lines 1-5).

Regarding claim 32, Maier further discloses, wherein the at least one teaching file is in accordance with a Medical Imaging Resource Centre standard (§0025, lines 1-7).

Regarding claim 33, Maier further discloses, wherein the formats include at least one selected from the group consisting of: AVW, HDR/IMG (Analyze format: version 8.0

and 7.5), BMP (Windows Bitmap format), DICOM (Digital Imaging and Communications in Medicine), GIF, JPEG, JPEG 2000, PNG, PNM, PPG, RGB, RGBA, SGI, TIFF, AVW, HDR/IMG (Analyze format:, version 8.0 and 7.5), Animated GIF, MIRA, Muti-sliced TIFF, MOV, AVI, MP3, RM, and Waveform for ECG, EEG, EMG (§0049, lines 13-Regards,

Regarding claim 34, Maier discloses, wherein all medical images are kept in their original format once retrieved (§0049, lines 1-5).

Regarding claim 35, Maier discloses, wherein for two-dimensional medical images, two additional JPEG images are generated for ease of browsing using a web browser, and for other image formats, an additional thumbnail image may be generated (e.g. Fig. 4, § 0061).

Regarding claim 36, Maier further discloses, wherein the two additional JPEG images are of the same size as thumbnail images (e.g. images in Fig. 5).

Regarding claim 37, Maier discloses a computer useable medium (e.g. a database connectivity module, §0036) has the same functions with claim 1. Therefore, claim 37 is rejected by the same reasons as discussed above.

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#### Conclusion

7. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to CECILE VO whose telephone number is (571)270-3031. The examiner can normally be reached on Mon - Thu (9AM - 5:00PM EST).

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Mohammad Ali can be reached on 571-272-4105. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

September 09, 2008

/Cecile Vo/ Examiner Art Unit 2169

/H. Q. P./ Primary Examiner, Art Unit 2169

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Supervisory Patent Examiner, Art Unit 2169